

July 28, 2021

The Honorable Janet Yellen
Secretary
Department of the Treasury
1500 Pennsylvania Avenue, NW
Washington, DC 20220

The Honorable Xavier Becerra
Secretary
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

The Honorable Chiquita Brooks-LaSure
Administrator
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Re: Patient Protection and Affordable Care Act; Updating Payment Parameters, Section 1332 Waiver Implementing Regulations, and Improving Health Insurance Markets for 2022 and Beyond Proposed Rule, Part 3 (CMS-9906-P)

Dear Secretary Yellen, Secretary Becerra and Administrator Brooks-LaSure:

National Patient Advocate Foundation (NPAF) appreciates the opportunity to provide feedback on Part 3 of the annual Notice of Benefit and Payment Parameters (NBPP) proposed rule. We are encouraged by the Administration's far-reaching efforts to improve the Health Insurance Marketplace and Medicaid enrollment experience for millions of people nationwide including many who are newly eligible for affordable coverage due to enhanced premium tax credits under the American Rescue Plan Act.

NPAF advocates for inclusive policies and practices that elevate patient and caregiver voices and put their perspectives at the heart of healthcare. Meaningfully addressing social determinants of health to achieve health equity is a core objective in our policy agenda. Our direct patient services counterpart, Patient Advocate Foundation (PAF), has delivered skilled navigation services and resources supporting the health, social and financial well-being for thousands of patients and families over its 25 years. PAF's navigators work to identify and address individuals' unmet needs and overcome health system challenges that fail to account for numerous sources of distress and disparate outcomes among people coping with complex chronic conditions. PAF navigators uncover a myriad of unmet needs often including household material hardships which are compounded by confusing eligibility and enrollment processes for insurance and other safety net programs. Needs navigation services are a lifeline for patients and families in securing equitable access to health coverage and care.

We echo the patient community's strong support for reinstating several Marketplace standards and policies that have diminished since 2017. NPAF particularly appreciates the Administration's efforts to prioritize the Navigator program which has demonstrated a positive impact with 4 in 10 people saying they would not have gotten the coverage they have without Navigator help.ⁱ The Centers for Medicare

and Medicaid Services' announcement to make \$80 million in grant funding available to Navigators for Federally Facilitated Exchanges (FFE) is another significant step promoting enrollment in quality health coverage and equipping patients with skilled support to make informed decisions.

NPAF offers the following comments on the proposed *Navigator Program Standards* drawing upon PAF's decades of experience providing needs navigation services for limited resourced populations.

We strongly support CMS' proposal to reinstate the requirements that Navigators:

1. Assist consumers with understanding basic concepts and rights related to health coverage and how to use it, and
2. Assist with various post-enrollment topics including the process of filing appeals of exchange eligibility determinations and the premium tax credit reconciliation process which involves referral to licensed tax advisers.

The insurance industry has its own lexicon that is unfamiliar and often confusing to the general population. It is common for people to struggle in understanding distinctions across the many insurance terms and how the various components (i.e., premium, copay, coinsurance, and deductible) affect them. Responding to this language gap, NPAF worked with our network of patient and caregiver volunteers to develop a health literacy tool for Open Enrollment 2021 (attached as an appendix). This resource details step-by-step instructions for patients on assessing their health care needs and comparing health plan options. The tool includes many of the topics outlined in CMS' non-exhaustive list. NPAF would welcome the opportunity to work with CMS and provide additional feedback on training materials and resources to assist Navigators in the fulfillment of this requirement.

Navigation services that emphasize individual follow up and post-enrollment action are critical for ensuring that eligible beneficiaries understand expectations for maintaining coverage. PAF's needs navigation services employ a personalized approach to help people maneuver complexities inherent in the health care and insurance system by linking individuals and families to appropriate government, private, and community-based resources and safety net programs. Sustained investment in the FFE Navigator program will decrease the uninsured rate and improve people's understanding on steps to optimize their insurance benefits. This will be particularly important for increasing health insurance literacy among limited resourced communities facing health inequities.

We highly recommend that the Administration continuously assess the Navigator training curriculum and its core competencies to effectively communicate, understand, and assist various underserved populations. Borrowing from PAF's needs navigation case manager services platform, CMS can also embed empathic communication skills development coursesⁱⁱ that include cultural competency and humility training and other effective supportive tactics to help consumers articulate their top concerns and priority needs so outreach and enrollment assistance can be tailored to reach them.

In addition to the proposed changes to navigator program standards, we support the proposed

extension of the 2022 Open Enrollment Period (OEP) from 45 days to 75 days. The continued uncertainty of the COVID-19 pandemic necessitates a policy change that affords people every opportunity to enroll in quality coverage. PAF data confirm that the pandemic has taken a major toll on patients' well-being with almost two-thirds of patients surveyed reporting emotional and mental health hardships.ⁱⁱⁱ Further, we urge the Administration to consider permanently extending the OEP which will help alleviate the pressure of comparing plans and making decisions in a short time frame among people with complex and chronic conditions who consistently experience emotional distress. Even with Navigator support, people need extended periods of time to perform a personal health care audit, speak with their doctors and pharmacists about treatment plans, and confer with family members to make thoughtfully informed decisions about plan options.

In conclusion, NPAF appreciates the Administration's focus on improving equitable health care coverage by restoring standards within the successful Navigator program in FFE states. NPAF will be pleased to work with Administration offices and staff to support quality practice standards development and associated trainings supporting consistent core competencies in the Navigator field. Providing needs navigation services directly to patients and caregivers is a hallmark of PAF's two and a half decades of organizational experience, expertise, and history. We are happy to share lessons learned and welcome the opportunity to meet directly with Administration staff to discuss these comments. Please contact Nicole Braccio at Nicole.Braccio@npaf.org or 202-301-9552 if we can provide further details.

Respectfully submitted,



Rebecca A. Kirch
EVP Health Care Quality and Value

ⁱ Kaiser Family Foundation. Consumer Assistance in Health Insurance: Evidence of Impact and Unmet Need. August 7, 2020. Available at: <https://www.kff.org/report-section/consumer-assistance-in-health-insurance-evidence-of-impact-and-unmet-need-issue-brief/>

ⁱⁱ <https://www.vitaltalk.org/>

ⁱⁱⁱ Patient Advocate Foundation Internal Data. Pandemic survey of approximately 3,200 patients in June-July 2020.